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U.S. PATENT AND TRADEMARK OFFICE BOARD OF PATENT APPEALS AND INTERFERENCES

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Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office

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Paper No: 2004-2306 Appeal No: Dister, Carl J. Appellant: 09/164,206 Application No: Hearing Room: **Hearing Docket:** Wednesday, February 09, 2005 Hearing Date: Hearing Time: 1:00 PM MADISON BUILDING (EAST WING) Location: 600 Dulany Street

Alexandria, Virginia 22313-1450

## NOTICE OF HEARING CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47.

The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up.

The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced.

## CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED.

This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

Failure to file this form within this time period will be construed as a waiver of the request for oral hearing.

37 CFR § 1.136(a) does not apply.

By order of the Board of Patent Appeals and Interferences

| BPAI HEARINGS FAX No:<br>(571) 273-0299<br>USPTO Central Fax No.<br>(703) 872-9306<br>Clerk of the Board (571) 272-9797 |          | BPAI Mailing Address: BOARD OF PATENT APPEALS AND INTERFERENCES UNITED PATENT AND TRADEMARK OFFICE P.O. BOX 1450 ALEXANDRIA, VIRGINIA 22313-1450 |                                 |
|---|----------|--|---------------------------------|
| In all communications relating to   | this app | oeal, please ide   | ntify the appeal by its number. |
| CHECK ONE: HEARING ATTENDANCE CONFIRMED  HEARING ATTENDANCE WAIVED  |          |  |                                 |
| Signature of Attorney/Agent/Ap  | pellant  | Date   | Registration No.                |
| Names of other visitors expected to accor   | mpany    |  |                                 |